

# CLAIMS ONLY

Application Number

10/766362

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend						
1	/						51					
2		/					52					
3		/					53					
4		/					54					
5		/					55					
6		/					56					
7	/						57					
8		/					58					
9		/					59					
10	~~~~~						60					
11		/					61					
12	/						62					
13		/					63					
14	~~~~~						64					
15		/					65					
16		/					66					
17		/					67					
18		/					68					
19		/					69					
20	/						70					
21	~~~~~						71					
22	~~~~~						72					
23		/					73					
24	~~~~~						74					
25	~~~~~						75					
26	~~~~~						76					
27	/						77					
28		/					78					
29	/						79					
30	/						80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	7						Total Indep					
Total Depend	17						Total Depend					
Total Claims	24						Total Claims					